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UTILITY PATENT APPLICATION TRANSMITTAL	
(Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))	
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APPLICATION ELEMENTS																
See MPEP chapter 600 concerning utility patent application contents.																
<p>1. <input type="checkbox"/> * Fee Transmittal Form (e.g., PTO/SB/05) (Submit an original and a duplicate for fee processing)</p> <p>2. <input checked="" type="checkbox"/> Specification [Total Pages 23] (preferred arrangement set forth below) - Descriptive title of the Invention - Cross References to Related Applications - Statement Regarding Fed sponsored R & D - Reference to Microfiche Appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure</p> <p>3. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 2]</p> <p>4. Oath or Declaration [Total Pages 2] a. <input type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. § 1.63(d)) (for continuation/divisional with Box 16 completed) i. <input type="checkbox"/> DELETION OF INVENTOR(S). Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b).</p>																
<p>5. <input type="checkbox"/> Microfiche Computer Program (Appendix)</p> <p>6. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. <input type="checkbox"/> Computer Readable Copy b. <input type="checkbox"/> Paper Copy (identical to computer copy) c. <input type="checkbox"/> Statement verifying identity of above copies</p>																
ACCOMPANYING APPLICATION PARTS																
<p>7. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))</p> <p>8. <input type="checkbox"/> 37 C.F.R. § 3.73(b) Statement <input type="checkbox"/> Power of (when there is an assignee) <input type="checkbox"/> Attorney</p> <p>9. <input type="checkbox"/> English Translation Document (if applicable)</p> <p>10. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Statement (IDS)/PTO-1449 <input type="checkbox"/> Citations</p> <p>11. <input type="checkbox"/> Preliminary Amendment</p> <p>12. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)</p> <p>13. <input type="checkbox"/> Small Entity Statement(s) <input checked="" type="checkbox"/> Statement filed in prior application, Statement(s) <input type="checkbox"/> Status still proper and desired (PTO/SB/05-12)</p> <p>14. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)</p> <p>15. <input type="checkbox"/> Other: _____</p>																
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<table border="1"> <tr> <td>Name (Print/Type) Douglas E. Erickson</td> <td>Registration No. (Attorney/Agent) 29 530</td> </tr> <tr> <td>Signature </td> <td>Date 2/12/01</td> </tr> </table>		Name (Print/Type) Douglas E. Erickson	Registration No. (Attorney/Agent) 29 530	Signature	Date 2/12/01											
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